PAGE 1 / 15

Image# 201802209094615101

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Other Than	An Authorized Committee	Office Use Only	,
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing over the lines.	type 12FE4M5	
Black PAC	1 1 1 1 1 1			
<u> </u>		<u> </u>		
ADDRESS (number and street) ▼	2090 Adam Clayto	n Powell Jr. Blvd.		
Check if different than previously reported. (ACC)	New York		NY 10027]-[
2. FEC IDENTIFICATION I	NUMBER ▼	CITY ▲	STATE ▲ ZIP C	CODE A
C C00609388		3. IS THIS REPORT (N)		
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:	(b) Monthly Report Due On:	Mar 20 (M3) Ju	20 (M5) Aug 20 (M8) 20 (M6) Sep 20 (M9) Oct 20 (M10)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report	(Q2) (C) 12-Day PRE-Ele Report		General (12G) C) Special (12S)	Runoff (12R)
January 31 Year-End Report		Election on	in the State	
July 31 Mid-Year Report (Non-elec Year Only) (MY)	tion POST-E	` /	Runoff (30R)	Special (30S)
Termination Repo (TER)	ort	Election on	in the State	
	01 02 Y	2018 through	01 31 2018]
I certify that I have examined Type or Print Name of Treasu	Shropshire, Adriai		lief it is true, correct and complete.	
Signature of Treasurer	ropshire, Adrianne, R., ,	[Electronically F	ciled) Date 02 20	2018
NOTE: Submission of false, erro	oneous, or incomplete i	nformation may subject the perso	n signing this Report to the penalties of 5	52 U.S.C. § 30109.
Office Use Only			FEC FO Rev. 05	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name Black PAC		
Report Covering the Period: From:	01 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	o: 01 / 01 / 2018
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
. (a) Cash on Hand January 1, 2018		491909.45
(b) Cash on Hand at Beginning of Reporting Period	. 495617.45	
(c) Total Receipts (from Line 19)	. 5610.66	9318.66
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	. 501228.11	501228.11
. Total Disbursements (from Line 31)	. 129500.80	129500.80
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	. 371727.31	371727.31
Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
This committee has qualified as a mul	Iticandidate committee. (see FEC FORM 1M)	
	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530 Local 202-694-1100	

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 05/2016)	of Receipts	Page 3
Write or Type Committee Name		
Black PAC		

	01 02 2018 To	o: 01 31 / 2018
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	0050.00	
(i) Itemized (use Schedule A)	2250.00	5000.00
(ii) Unitemized	2982.33	3940.33
(iii) TOTAL (add		45 45 45 45
Lines 11(a)(i) and (ii)▶	5232.33	8940.33
	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)(d) Total Contributions (add Lines	4	4 4
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	5232.33	8940.33
12. Transfers From Affiliated/Other	4 4	
Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
		0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	378.33	378.33
(Carry Totals to Line 37, page 5)	376.33	310.33
Refunds of Contributions Made to Federal Candidates and Other		
Political Committees	0.00	0.00
17. Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		45 45
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
		4 4
(b) Levin Funds (from Schedule H5)	0.00	0.00
,	4	4 4
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	5610.66	9318.66
20. Total Federal Receipts	5610.66	0240.00
(subtract Line 18(c) from Line 19)▶	3010.00	9318.66

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal	.5.0	Jaionaa Toal-to-Date
Activity (from Schedule H4)	0.00	
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	79502.31	79502.31
(c) Total Operating Expenditures	4 4	
(add 21(a)(i), (a)(ii), and (b))▶	79502.31	79502.31
2. Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees	4 4	200
and Other Political Committees Independent Expenditures	0.00	0.00
(use Schedule E)	0.00	0.00
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
(ass estimates)	7 7	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other	4 4	
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds	, , , , ,	4 4
(add Lines 28(a), (b), and (c))	0.00	0.00
. Other Disbursements (Including		
Non-Federal Donations)	49998.49	49998.49
. Federal Election Activity (52 U.S.C. § 3010	1(20))	
(a) Allocated Federal Election Activity		
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	200	222
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	129500.80	129500.80
. Total Federal Disbursements	4 4	4 4
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	129500.80	129500.80

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

FEC FORM 3X (Rev. 05/2016)		Page 5
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	5232.33	8940.33
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5232.33	8940.33
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	79502.31	79502.31
7. Offsets to Operating Expenditures (from Line 15, page 3)	378.33	378.33
8. Net Operating Expenditures (subtract Line 37 from Line 36)	79123.98	79123.98

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** Use separate schedule(s) (check only one) **X** 11a 11b 11c

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6 OF

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Black PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Arndorfer, Elizabeth, , , Date of Receipt Mailing Address 3505 Laguna Ave 03 2018 City Zip Code State Transaction ID: VTEF8NJ7XG0 CA Palo Alto 94306-2652 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Program Officer** Packard Foundation Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Klarman, Michael, , , Date of Receipt Mailing Address 103 Irving St 01 2018 City State Zip Code Transaction ID: VTEF8P46RQ4 MA Cambridge 02138-2025 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Harvard University Professor Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Biernacki, Melinda, , , Date of Receipt Mailing Address 956 10th Ave E 12 2018 Apt 206 City Zip Code State Transaction ID: VTEF8NMTTT5 WA Seattle 98102-4558 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Seattle Cancer Care Alliance Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** Use separate schedule(s) (check only one) **X** 11a 11b 11c

15

7 OF

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Black PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Jennings, M., Anne, , Date of Receipt Mailing Address 1515 Edith St 12 2018 City Zip Code State Transaction ID: VTEF8NMTTZ5 CA Berkeley 94703-1123 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) N/A Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Haines, Lisbeth, , , Date of Receipt Mailing Address 201 Washington St 01 2018 City State Zip Code Transaction ID: VTEF8P46RZ7 NJ Rocky Hill 08553 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **EHR GoLive** Chief Medical Officer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... 2250.00 TOTAL This Period (last page this line number only).....

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SCHEDITIE V (EEC Earm 3A)			FOR LINE NUMBER: PAGE 8 OF 15							
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the	11a 11b 11c 12							
		Detailed Summary Page								
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or for commercial purposes, other than using the			person for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
Black PAC										
Full Name of Individual (Last, First, Middle I	nitial) or Full C	Organization Name								
A. 270 Strategies Inc			Date of Receipt							
Mailing Address 626 W Jackson Blvd			01 09 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
Ste 600 City	State	Zip Code	Transaction ID : VTEF8NK7P66							
Chicago	IL	60661-5671	Amount of Each Receipt this Period							
FEC ID number of contributing										
federal political committee.	C		378.33							
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item							
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Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		378.33	Refund							
Other (specify)		070.00	1							
Full Name of Individual (Last, First, Middle I	nitial) or Full C	Drganization Name								
В.	,	. G	Date of Receipt							
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City	State	Zip Code	A (5 1 5							
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Full Name of Individual (Last, First, Middle I ${\bf C}$.	nitial) or Full C	Organization Name	Date of Receipt							
Mailing Address			M M / D D / Y Y Y Y							
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City	State	Zip Code								
-			Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C									
rederar politicar committee.										
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	\dashv							
Primary General	Ayyreyate	Teal-10-Dal€ ▼	-							
Other (specify)	11									
		, , , , , , , , , , , , , , , , , , , ,								
			070.00							
SUBTOTAL of Receipts This Page (optional)		······)	378.33							

TOTAL This Period (last page this line number only).....

378.33

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE (check only 21b 28a			INE NUMBER: PAGE 9 OF 15 only one)					
TILIVIIZED DISBUNGEIVIEN 13					23 26 27 28c 29 30b					
Any information copied from such Reports and St or for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full) Black PAC										
Full Name (Last, First, Middle Initial) A. Sage Payment Solutions				Date of Disl	bursement					
Mailing Address 12120 Sunset Hills Rd Ste 500				01	02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City Reston	_	Code 0190-5858			cation Number					
Purpose of Disbursement Credit Card Processing Fees Candidate Name		[ction ID : VTDG0A4CH					
	rsement For:		Category/ Type	Amount of E	Each Disbursement this Period					
Senate President State: District:	Primary Other (specify)	General ▼		Memo I	tem					
Full Name (Last, First, Middle Initial) B. BLDG Management Co. Inc.				Date of Disk	bursement					
Mailing Address 417 5th Ave FI 4				01	30 2018					
City New York Purpose of Disbursement	_	Code 0016-2239			cation Number					
Rent Candidate Name		[Category/ Type		ction ID : VTDG0A49AC Each Disbursement this Period					
Office Sought: House Senate President State: Disbut	rsement For: Primary Other (specify)	General	1,500	Memo I	1584.37 tem					
Full Name (Last, First, Middle Initial) C. Ashley Green				Date of Disk	bursement					
Mailing Address 3955 15th Ave S				01	08 2018					
City Saint Petersburg		Code 3711-2537			cation Number					
Purpose of Disbursement Field Consulting Services Candidate Name		[Category/ Type		ction ID: VTDG0A49Al Each Disbursement this Period					
Office Sought: House Disbu Senate President	rsement For: Primary Other (specify)	General ▼		Memo I	2916.67					
State: District:	-				<u></u>					
State: District: SUBTOTAL of Disbursements This Page (option TOTAL This Period (last page this line number of	•				5712.71					

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SCHEDULE B (FEC Form 3X)			FOR	FOR LINE NUMBER: PAGE 10 OF 15						
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check	•						
		Summary Page	X		22 28h	23	26	27		
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Any information copied from such Reports and Statem or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full)										
Black PAC										
Full Name (Last, First, Middle Initial)										
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Mailing Address 1230 Croes Ave 19-H					01		31	2018	_	
,	State NY	Zip Code			FEC Id	entificatio	n Number			
Bronx Purpose of Disbursement	INI	10472-4536								
Communications & Organizational Consulting Service	es			\neg \Box	C					
Candidate Name			Cata				ID: VTD		riod	
			Categor Type	у/	AIIIOUN	u ⊏acn	ופאומפום	nent this Pe	iiou	
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	Other (spec	cify) ▼			Me	mo Item				
State: District:										
Full Name (Last, First, Middle Initial)					Deta -	. Diak	aman t			
B. Berlin Rosen, Ltd.					Date of	Disburse				
Mailing Address 15 Maiden Ln Ste 1600					01		18 / Y	2018		
,	State	Zip Code			FFC Id	entificatio	n Number			
Tion Tonk	NY	10038-5111				o i i i i i i i i i i i i i i i i i i i	radifibei			
Purpose of Disbursement Travel				$\neg \bot$	C					
Candidate Name			<u> </u>	<u> </u>			ID : VTDC			
Candidate Hame			Categor Type	y/	Amount	t of Each	Disburser	ment this Pe	riod	
Office Sought: House Disbursen	nent For:		1,400	-				584.00		
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President	Other (spec	cify)			Memo Item					
State: District:					IVIE	o itelil				
Full Name (Last, First, Middle Initial)										
C. Adrianne Shropshire					Date of	Disburse	ement			
Moiling Addross 2000 Addros Claster Brown L. B. J.					M M M	/ D		2019	1	
Mailing Address 2090 Adam Clayton Powell Jr Blvd Ste 201A					UI		31	2018	_	
	State	Zip Code		$\overline{}$	EEO 14	ontificati-	n Number			
New York	NY	10027-4974		_	FEC 10	enuncatio	n Number			
Purpose of Disbursement Strategic Consulting Services				$\overline{1}$	C	nsaction	ı ID : VTD	G04941		
Candidate Name			Categor Type	y/				nent this Pe	riod	
Office Sought: House Disbursen	nent For:		- 7,60	-				6250.00		
	Primary	General				-	7	4		
President	Other (spec	cify) 🔻			Me	mo Item				
State: District:					L IVIC					
								0224.02		
SUBTOTAL of Disbursements This Page (optional)				•				9334.00		
TOTAL This Period (last page this line number only)										

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SCHEDULE B (FEC Form 3X)	Haa	INE N	IE NUMBER: PAGE 11 OF							15		
ITEMIZED DISBURSEMENTS	I for each category of the				eck only one)							
		Summary Page		21b 28a	22 28b		23 28c		26 29	27 30b	1	
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or for commercial purposes, other than using the name												
NAME OF COMMITTEE (In Full)		- •										
Black PAC												
V												
Full Name (Last, First, Middle Initial)					Date of	Dich	nurcai	mant				
A. American Express					M M	DISL	D I			YY		
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,	tate	Zip Code			FEC Ide	entific	cation	Nur	nher			
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Purpose of Disbursement Credit Card Payment				7	С							
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	Primary	General							,			
President State: District:	Other (spec	city) 🔻			Me	mo It	em					
Full Name (Last, First, Middle Initial)				_								
B. Union Insurance Group					Date of	Disb	ourser	ment				
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Mailing Address 303 W Erie St Ste 310					01		19		L	2018]
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Chicago Purpose of Disbursement	IL	60654-3973				_	_	_	-		1	
Insurance					C	_					ļ	
Candidate Name			Category	,/	Tra Amount					A49A. ent this		iod
			Type							_	-	
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	Primary Other (spec	General										
State: District:	omer (spec	,			Me	mo It	em					
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C. Berlin Rosen, Ltd.					Date of	Disb	ourser	ment				
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Mailing Address 15 Maiden Ln					01		04	ŀ		2018		
Ste 1600 City S	tate	Zip Code			FF0 ::	,						
,	NY	10038-5111			FEC Id	entific	cation	Nur	nber			
Purpose of Disbursement Public Affairs & Strategic Communication Consulting	Sarvicas 9	Digital		\neg	C		-			-		
Advertisements Candidate Name	, JOI VICES O	Digital								A4BK		
Candidate Name			Category Type	//	Amount	of E	ach I	Disbu	ırseme	nt this	Peri	iod
Office Sought: House Disbursem	ent For:		туре	-						57224	1.68	
	Primary	General				- 7			7			
President	Other (spec	cify) 🔻			Me	mo It	em					
State: District:					LI WIC							
										E040	2.04	T
SUBTOTAL of Disbursements This Page (optional)				•					7	59133	ა.84	
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SCHEDULE B (FEC Form 3X)	10	I llaa aanarata aahadula(a) I				NUMBER: PAGE					
ITEMIZED DISBURSEMENTS		parate schedule(s) category of the	(OLICOIT OI	(check only one)] 00		
		Summary Page	21 28			23 28c		26 29	27 30b		
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Any information copied from such Reports and Statel or for commercial purposes, other than using the nar											
NAME OF COMMITTEE (In Full)											
Black PAC											
/											
Full Name (Last, First, Middle Initial)				Data	of Did	sburse	mont				
A. Civix Strategy Group, LLC				Date		D		V	Y Y	V	
Mailing Address 114 N Main St				01		25		1	2018	1	
Ste 203											
,	State NH	Zip Code		FEC	ldenti	fication	n Num	nber			
Concord Purpose of Disbursement	INII	03301-4953				-					
Strategic Consulting Services & Travel				C	****		ID · Y	TDOO	A 40 A I		
Candidate Name			Category/						A49Al nt this F	Period	
			Type		-	-	_				
	ment For:	Camanal				-			5166.2	2	
Senate President	Primary Other (spe	General									
State: District:	J.1.01 (OPC			M	1emo	Item					
Full Name (Last, First, Middle Initial)											
B. Berlin Rosen, Ltd.				Date	of Dis	sburse	ment				
<u></u>				M		D			Y Y	Υ	
Mailing Address 15 Maiden Ln Ste 1600				01	_	04	4	<u></u>	2018		
,	State NY	Zip Code 10038-5111		FEC	Identi	fication	n Num	nber			
New York Purpose of Disbursement	INI	10036-5111		C				-			
Digital Advertisement					ranca	otion	ID : 1/	TDCC	A4BJJ		
Candidate Name			Category/						A4BJJ nt this F	Period	
Office Courthy			Type		_	-	_	-			
Office Sought: House Disburse	ment For: Primary	General						7	1.5	1	
President	Other (spe										
State: District:	(opc	- , ,		M	1emo	Item					
Full Name (Last, First, Middle Initial)											
C.				Date	of Dis	sburse	ment				
Martina Address				М	M /	D	D /	Υ	Y	Υ	
Mailing Address					_			_			
City	State	Zip Code		FEC	ldenti	fication	n Num	nber			
Purpose of Disbursement					-		-	-	-		
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TOTAL This Period (last page this line number only)								79348.2	28	

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SCHEDULE B (FEC Form 3X)			FOR	FOR LINE NUMBER: PAGE 13 OF 15					
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(checl	k only			26 27		
		Summary Page		21b 28a	22 28b	23 28c	26 x 29	27 30b	
Associate and Other									
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NAME OF COMMITTEE (In Full)									
Black PAC									
Full Name (Last, First, Middle Initial)					5 .				
A. Berlin Rosen, Ltd.					M = M		D / Y	1 Y 1 Y 1 Y	7
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SUBTOTAL of Disbursements This Page (optional)				•		· -		49998.49	,
TOTAL This Period (last page this line number only)				_				49998.49)

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 14
FOR LINE NUMBER: (check only one)

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OF

NAME OF COMMITTEE (In Full) Black PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Nonfederal In-Kind Digital Advertisement to Berlin Rosen, Ltd. Friends of Justin Fairfax Mailing Address 15 Maiden Ln Ste 1600 City State Zip Code New York NY 10038-5111 Transaction ID: VTBHG9H9Q10 Outstanding Balance Beginning This Period 16666.16 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 16666.16 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Nonfederal In-Kind Digital Advertisement to Berlin Rosen, Ltd. Northam for Governor Mailing Address 15 Maiden Ln Ste 1600 City State Zip Code New York 10038-5111 Outstanding Balance Beginning This Period Transaction ID: VTBHG9H9Q02 16666.17 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 16666.17 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Digital Advertisement Berlin Rosen, Ltd. Mailing Address 15 Maiden Ln Ste 1600 City State Zip Code NY 10038-5111 New York Outstanding Balance Beginning This Period Transaction ID: VTBHG9H9PZ4 1.51 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 1.51 0.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 15 OF
FOR LINE NUMBER:
(check only one)

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x	10

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NAME OF COMMITTEE (In Full) Black PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Nonfederal In-Kind Digital Advertisement to Berlin Rosen, Ltd. Virginians for Mark Herring Mailing Address 15 Maiden Ln Ste 1600 City State Zip Code New York NY 10038-5111 Transaction ID: VTBHG9H9Q28 Outstanding Balance Beginning This Period 16666.16 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 16666.16 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Outstanding Balance at Close of This Period Payment This Period Amount Incurred This Period 0.00 1) SUBTOTALS This Period This Page (optional)..... 0.00 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶